

## Iowa Child and Adult Care Food Program

Sponsored Center Site Review Form

**Instructions:** Complete this form for sponsored center site reviews. Another form may be used if each required review element is included.

B-7

<b>4. SAFETY/SANTATION</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
Do participants and staff wash hands before and after meals and after using the restroom?				
Are can openers washed daily or when used?				
Are tables washed and sanitized before meals?				
Is the refrigerator(s) clean and at a temperature 32°-40°F?				
Is the freezer clean and at a temperature of 0° F or below?				
Are disposable gloves or clean utensils or hands used to directly handle food?				
Using a 3-compartment sink, is the proper manual dishwashing sequence followed?				
Is the dishwasher temperature maintained at or above 155°F?				
Are transported foods kept at safe temperatures (below 40°F for cold foods and above 140°F for hot foods)?				
Is an appropriate sanitizer used on food contact surfaces?				
Is sanitizer/bleach used mixed & used according to directions?				
Do food handlers wash hands before handling food and after touching anything unsanitary?				
Is food served at appropriate temperatures?				
Is food properly stored in refrigeration units and in dry storage areas (labeled, sealed, insect proof)?				
Are regular cleaning schedules maintained?				
Is a licensed pest control service used regularly?				
Are food storage areas free of pests, cleaning supplies and medicines?				
Are there any obvious fire, health or safety hazards observed in the center?				
<b>5. CIVIL RIGHTS</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
Is an "And Justice for All" civil rights poster on display in a public area?				
All meals are served equally to all participants regardless of race, color, sex, age, disability & national origin?				

<b>6. RECORD KEEPING</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
<b>5-day reconciliation:</b> Do meal counts correspond to enrollments & attendance for the last five days**?				If no, is a factor for parent contact
Are meal count records up to date?				
Are daily dated menus on file for all meals served?				
Are menus posted in the kitchen and in each room where food is served?				
Are meal substitutions recorded on menus and food production records?				
Menus offer a healthy variety of colors, flavors, textures, shapes, temperatures, familiar & new foods?				
Do weekly menus include at least 3-4 servings of Vitamin C-rich and 2-3 serving of Vitamin A-rich foods?				
Do menus include fresh fruits and vegetables at least twice weekly?				
Are sweets limited to twice weekly?				
Do production records documents that minimum required amounts of food were prepared?				
Were food production records completed for the observed meal?				
Is attendance recorded separately from meal counts?				
Are medical statements on file for participants who are unable to follow the CACFP meal pattern?				
<b>7. TRAINING</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
Key staff * have <u>at least</u> 1.5 hours of CACFP training prior to Program operations &/or within the last year & enough to do duties correctly?				Staff may need more than 1.5 hrs to perform CACFP duties
If not, list CACFP training topics needed and when this will be provided.	<b>Topics</b>			<b>Dates</b>
<b>8. TEAM NUTRITION</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
Do participants have several daily opportunities to learn about food, healthy eating and physical activity?				
Do children have opportunities for open and adult led physical activity daily both indoors and outdoors? (About 60 min. total for children)				
Participants have weekly planned food or nutrition activities?				
Do families receive information on center nutrition and physical activity policies when enrolling?				
Do participants with special needs have their nutrition and physical activity needs provided for while they are in care?				

**\*Key people that must receive yearly CACFP training are private "for-profit" center owners, staff with CACFP responsibilities including but not limited to administrative and foodservice staff, site monitors, all teachers/staff with mealtime responsibilities, and volunteers or board members with primary CACFP mealtime and/or decision-making responsibilities pertaining to the claim.**

**9. FINDINGS (continue on separate page if needed)**

<b>Good management practices observed:</b>		
<b>Recommendations:</b>		
<b>Required changes from this review</b> (check box if any serious deficiencies were found <input type="checkbox"/> and identify which findings were serious deficiencies):	<b>Corrective Action Plan:</b>	
	Date for completion _____	
<b>Description of Sponsor follow up for required changes from previous review(s):</b>		
Have required changes from previous review(s) been maintained? Y__ N__ (explain):		Date of any additional follow up _____
<b>If review was due to block claim, describe findings:</b>		
<b>Reviewer Signature:</b>	<b>Date:</b>	<b>Center Staff Signature:</b>